#### food sensitivity test

### food & drinks diary





#### Introduction

This diary is designed to help you determine the link between the foods and drinks that you consume and any symptoms that you may be experiencing.

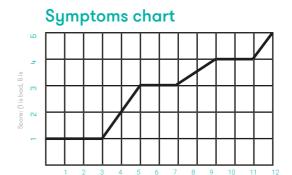
Completing your diary will help monitor improvements to your health and wellbeing and should help manage your new diet better. Together with the guidebook, we will give you the advice, confidence and support you need to get yourself back on track.



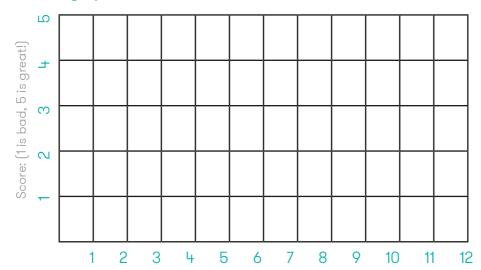
#### How to use the diary







#### Symptoms chart



Fill this chart in after each week so you can monitor your progress.

By the end of week 12 you should be able to see an improvement in your general health $^{\star}$ .

\*Our research shows that on average, health improvements are experienced between 20 and 60 days after eliminating the ingredients highlighted by the test.

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	Food		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Food		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Food		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Friday	F000d		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	

## Changing your diet changing your outlook



How do you <sup>.</sup>	feel	this	week	?
(please tick)				

Excellent

Significantly better
Slightly better

Same as before

Worse

#### Any new symptoms

Yes (please detail)



#### Don't panic, plan!

Week one is often the hardest week - this is because it is a new way of looking at what you can eat and drink and can mean, for some, quite a dramatic change. It is important that you start as you mean to go on - you can do it!

(YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

#### Have you managed to eliminate all your problem ingredients?

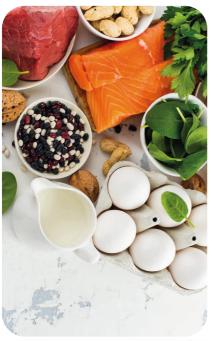
Yes

No (list which ones)

## Week 1

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	Po 04		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	P004		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Po 04		P004		Pood	
Feeling 1-5	Drink		Drink		Drink	
Friday	P 0 0 4		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Drink Food		Pood		Drink Food	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	

#### Make the effort, you can do it!



#### Don't give up!

#### How do you feel this week? (please tick)

Excellent Significantly better Slightly better

Same as before

Worse

## Week 2

#### Any new symptoms

Yes (please detail)

(YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

Have you managed to eliminate all your problem ingredients?

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Po 04		Food		Pood	
Feeling 1-5	Drink		Drink		Drink	
Friday	P 0 0 4		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Drink Food		Food		Pood	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	

### Be realistic, small steps are the key to success



How do you feel this week? (please tick)	<b>X</b>
Excellent Significantly better Slightly better Same as before Worse	ek 3
Any new symptoms	
Yes (please detail) No	



#### Step by step!

Be realistic with your expectations and if you don't initially reach your targets, simply break them down so they are more manageable and start again.

(YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

Have you managed to eliminate all your problem ingredients?

Yes
No (list which ones)

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	F000d		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Pood		P000 L000		P000 L000	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Friday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Pood		Food		Pood	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	

### A great opportunity to try new foods



(please ti	ick)	
	Excellent Significantly better Slightly better Same as before Worse	
Any ne	w symptoms	
	Yes (please detail) No	
	ecommend that you seek medical advice Doctor or Health Practitioner if symptoms or worsen.)	S
_	ou managed to eliminate all roblem ingredients?	
	Yes No (list which ones)	

How do you feel this week?



### Don't get bored with your diet.

Explore new recipes and plan meals and drinks which do not contain problem ingredients.
There are a great range of recipe books available - check online or your local bookshop for details.

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	Food		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Food		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Food		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Friday	F000d		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	

### Going out to eat or drink doesn't have to cause problems



How d	lo you	feel	this	weel	(
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(please tick)

Excellent

Significantly better
Slightly better

Same as before

( ) Worse

## Week 5

#### Any new symptoms

Yes (please detail)



### You can go out and enjoy yourself!

Call ahead and check with the restaurant to see if they cater for your needs. Check their menu online and make sure you have a backup option ready. (YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

Have you managed to eliminate all your problem ingredients?

$\bigcup$	Yes
	No

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	Po 04		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	P004		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Pood		P004		Pood	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Po 04		P00 U		Pood	
Feeling 1-5	Drink		Drink		Drink	
Friday	P 0 0 4		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Drink Food		Pood		Drink	
Feeling 1-5	Drink		Drink		O rink	
Sunday	Pood		P000		Pood	
Feeling 1-5	Drink		Drink		Drink	

### Get motivated for exercise



#### How do you feel this week? (please tick)

Excellent

Significantly better
Slightly better

Same as before

Worse

## Week 6

#### Any new symptoms

Yes (please detail)



#### Improve your health

Now you are well underway with your diet, why not consider introducing some exercise into your routine too? Simply walking to the shops instead of driving or running up the stairs rather than walking - it all adds up!

(YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

Have you managed to eliminate all your problem ingredients?

Yes

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	P 00 d		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	Pood 9		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Po 0 4		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Po 04		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Friday	P 0 0 d		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Saturday	P 0 0 d		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	

#### Regularly review your progress



#### How do you feel this week?

Slightly better

Week

Same as before

Worse

#### (please tick)

Excellent

Significantly better

#### Any new symptoms

Yes (please detail)



#### **Review and assess** your progress properly

(YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

#### Have you managed to eliminate all your problem ingredients?

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	F000d		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Pood		Pood		Food	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Pood		Pood		Food	
Feeling 1-5	Drink		Drink		Drink	
Friday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	

### Make time for rest and relaxation



How do you feel this week? (please tick)

Excellent
Significantly better

Slightly better

Same as before

Worse

Week 8

Any new symptoms

Yes (please detail)



#### Take time to relax!

Rest and relaxation are major factors in maintaining good health. Ensure you make a little time for yourself each day – a few deep breaths and a stretch works (YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

Have you managed to eliminate all your problem ingredients?

Yes Yes

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	Food		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	Pood		P000 D000		Pood	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Pood		P0 04		Pood	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Friday	P004		Pood		Food	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Pood		Pood		Food	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Pood		Food	
Feeling 1-5	Drink		Drink		Drink	

### Get your friends to help you out



	How	do	you	feel	this	week?
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(please tick)

Excellent

Significantly better
Slightly better

Same as before

Worse

## Week 9

#### Any new symptoms

Yes (please detail)



#### Find a friend to exercise with!

You don't want to let them down by not turning up, so you'll be more likely to continue with your exercise plan. Friends can also help you with new recipe ideas or tips on how you can stick to your plan. Just talking to someone about your new regime can make you feel good.

(YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

Have you managed to eliminate all your problem ingredients?

Yes

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	Po 04		Pood		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	Pood 9		P0004		P009	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Po 04		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Thursday	P0 04		Pood		Food	
Feeling 1-5	Drink		Drink		Drink	
Friday	P00d		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Po 0 4		Drink Food		Drink Food	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		P 0 0 4		Pood	
Feeling 1-5	Drink		Drink		Drink	

## Don't give up stay positive



#### How do you feel this week? (please tick)

Excellent

Significantly better
Slightly better

Same as before

Worse

# Week 10

#### Any new symptoms

Yes (please detail)



### Stay positive by being realistic

This way, you are more likely to achieve the goals you set in the beginning. Keep reminding yourself how well you've done so far and make a determined effort to stay on track with your recommended diet.

(YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

Have you managed to eliminate all your problem ingredients?

1	1
	)

Yes

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	P004		Pood		P0004	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Po 04		Food		Pood	
Feeling 1-5	Drink		Drink		Drink	
Thursday	P 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Friday	P 0 0 4		Pood		P004	
Feeling 1-5	Drink		Drink		Drink	
Saturday	P 0 0 0		Pood		Drink	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	

### Drink plenty of water for maximum benefit





### Drink plenty of water, it's good for you!

Experts say you should drink at least 8 glasses of water a day to make sure your body is hydrated properly. Sipping throughout the day may be easier than trying to have it all in one go! Remember other drinks contribute to your fluid intake but try to avoid carbonated or caffeinated drinks. Try herbal or fruit teas or natural fruit juices.

#### How do you feel this week? [please tick]

Excellent
Significantly better

Slightly better

Same as before

Worse

#### Any new symptoms

Yes (please detail)

(YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

Have you managed to eliminate all your problem ingredients?

Yes
No (list which ones)

# Week 11

	Breakfast	Snacks	Lunch	Snacks	Dinner	Exercise
Monday	F000d		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Tuesday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Wednesday	Pood		Pood		Food	
Feeling 1-5	Drink		Drink		Drink	
Thursday	Pood		Pood		Food	
Feeling 1-5	Drink		Drink		Drink	
Friday	Pood		Pood		Pood	
Feeling 1-5	Drink		Drink		Drink	
Saturday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	
Sunday	Pood		Food		Food	
Feeling 1-5	Drink		Drink		Drink	

## The first three months are complete, keep going!



How do you feel this week? (please tick)

Excellent

Significantly better
Slightly better

Same as before

Worse

Week 12

Any new symptoms

Yes	(please detail
No	



#### The hardest bit is done!!

Now that you have been following your recommendations for three months, it will be almost second nature for you to recognize what you should and shouldn't be eating and drinking - keep it up and well done! (YorkTest recommend that you seek medical advice from your Doctor or Health Practitioner if symptoms continue or worsen.)

Have you managed to eliminate all your problem ingredients?

Yes
No (list which ones)



